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Under the Peoblytork Reduction Act of 1985, no persons are required to re-	Application Number	10/711,408		
REVOCATION OF POWER OF	Filing Date	September 16, 2004		
ATTORNEY WITH	First Named Inventor	Holmut E. Freitag		
NEW POWER OF ATTORNEY	Art Unit	1641		
AND	Examiner Name			
	Attorney Docket Number	12927-11 LAB		

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I hereby revoke all pre	vious powers of attorney given it	n the al	oove-id	lentified applica	ation.
A Power of Attorne	ey is submitted herewith.				
OR I hereby appoint t	he practitioners associated with the	e Custo	mer Nu	mber.	
1	correspondence address for the a	bove-id	entified	application to:	
Customer Nu	associated with mber:		· · · ·		
OR Firm or	Dr. Lola A. Bartoszewicz				
Individual Name	Sim & McBurney				
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City	Toronto	State	Ontario	)	Zip MSG 187
Country	Canada				
Telephone	416 595 1155		Fax	416 595 1163	
I am the:  Applicant/Invent Assignee of ret Statement under	cord of the entire interest. See 37 C er 37 CFR 3.73(b) is enclosed. (For	mriu	SDISO		
	ASIGNATURE of Applican	t or As	signee	of Record	
Signature	1. fresta	2			
Name Helmut E. F.	reitag	<del>1\=</del>	e lomba:	20 1	
Date	AUN 2005		elephoi		mit multiple forms former transpose
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This collection of information is required by 37 CFR 1.38. The information is required to obtain or ration a benefit by the public which is to file (and by the USPYO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 requires to complete, including gathering, properties, and submitting the completed application form to the USPYO. Time will vary depending upon the individual cline. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information. Orficer, U.S. Patent and Trademark Office, U.S. Department of Committee, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Firm or Individual	Name Sin & McBurney			
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Page 1 of 3

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# Declaration and Power of Attorney For Patent Application

### English Language Declaration

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

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is attached hereto. was filed on 09/16/2004		as United States Application No. o	r PCT International
A - Altantian Number 10/7	11.408		
and was amended on		(if applicable)	
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Page 3 of 3

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (list name and registration number)

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43394

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